Case 19-50858-FJS Doc 1 Filed 06/18/19 Entered 06/18/19 11:17:27 Desc Main Document Page 1 of 53

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

### Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Michael First name  Donte Middle name	First name  Middle name
	Bring your picture identification to your meeting with the trustee.	Jones Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7941	

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Case number (if known)

Debtor 1 Michael Donte Jones

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 2116 Roanoke Avenue **Newport News, VA 23607** Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code **Newport News City** County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 Michael Donte Jones

Case number (if known)

Par	t 2: Tell the Court About	Your B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required by</i> of page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy abox.		
	choosing to file under	■ Chapter 7						
		□с	hapter 11					
		□с	hapter 12					
		□с	hapter 13					
8.	How you will pay the fee		about how yo	u may pay. Tyր attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money llf, your attorney may pay with a credit card or check with		
					tallments. If you choose this options to (Official Form 103A).	n, sign and attach the Application for Individuals to Pay		
			I request tha	t my fee be wa	aived (You may request this option	only if you are filing for Chapter 7. By law, a judge may,		
						ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out		
						ial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No						
	last 8 years?	☐ Ye						
			District		When	Case number		
			District	-		Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	□ Y€						
	not filing this case with you, or by a business partner, or by an affiliate?		,					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor	-		Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	■ No	Go to li	ne 12.				
	residence?		<b>U.</b>		ained an eviction judgment against	vou?		
		□ Ye	es. Has yo	No. Go to line	, , ,	. you.		
						ludgment Against You (Form 101A) and file it as part of		
				this bankrupto		augment Agamst Tou (Form 10 1A) and the it as part of		

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		Document	Paye 4 01 33		
Debtor 1	Michael Donte Jones		Case number	(if known)	

art	3: Report About Any Bu	sinesses	You Own	as a Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busin	ness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	Number, Street, City, State & ZIP Code		
	it to this petition.		Check		to describe your business:	
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	u are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate lines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure U.S.C. 1116(1)(B).			
	For a definition of small	No.	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	ling under Chapter 1	1, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Part	4: Report if You Own or	Have Anv	Hazardo	us Property or Any	Property That Needs Immediate Attention	
	Do you own or have any			,	,,	
	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?		
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number, Street, City, State & Zip Code	
					Hambor, Ottoot, Oity, Otate & Zip Oode	

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Debtor 1 Michael Donte Jones

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Michael Donte Jo	nes			Case numbe	r (if known)		
Par	t 6: Answer These Quest	ions for Re	porting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily c individual primarily for a per	consumer debts? Consonal, family, or house	sumer debts are defir hold purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
			Are your debts primarily be money for a business or inv					
			□ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consu	mer debts or busines	s debts		
		=						
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. are paid that funds will be a	Do you estimate that a vailable to distribute to	ofter any exempt propounts of the control of the co	erty is excluded and administrative expenses		
	administrative expenses		■ No					
	are paid that funds will be available for		☐ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>■</b> 1-49		□ 1,000-5,000	)	☐ 25,001-50,000		
	you estimate that you owe?	□ 50-99		<u> </u>		<u> </u>		
		☐ 100-19 ☐ 200-99		<b>1</b> 0,001-25,0	000	☐ More than100,000		
10	Uavr much da vav							
19.	How much do you estimate your assets to	■ \$0 - \$5	0,000 1 - \$100,000	□ \$1,000,001 □ \$10,000,00		☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion		
	be worth?		01 - \$500,000	□ \$50,000,00	1 - \$100 million	□ \$10,000,000,001 - \$50 billion		
			01 - \$1 million	□ \$100,000,0	01 - \$500 million	☐ More than \$50 billion		
20.	How much do you	<b>\$0 - \$5</b>	0,000	□ \$1,000,001		☐ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?	. ,	01 - \$100,000		1 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million		1 - \$100 million 01 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		ш ф500,0				•		
Par	Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
						under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.		
			ney represents me and I did , I have obtained and read th			t an attorney to help me fill out this		
		I request r	relief in accordance with the	chapter of title 11, Unit	ted States Code, spec	cified in this petition.		
		bankrupto and 3571.	y case can result in fines up			r property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519,		
			ael Donte Jones  Donte Jones		Signature of Debtor	72		
			of Debtor 1		-			
		Executed			Executed on			
			MM / DD / YYYY		MM	/ DD / YYYY		

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Debtor 1 Michael Donte Jones Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Kim A. L	.ewis	Date	June 17, 2019
Signature of A	Attorney for Debtor	_	MM / DD / YYYY
Kim A. Lew	ris 28045		
Printed name			
John W. Le	e, P.C.		
Firm name	·		
2019 Cunni	ingham Drive, Suite 200		
Hampton, V	,		
Number, Street, C	City, State & ZIP Code		
Contact phone	757-896-0868	Email address	johnwleepc@gmail.com
28045 VA			
Bar number & Sta	te		

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		Docum	eni Page 8 oi 53	
Fill in this infor	mation to identify your	case:		
Debtor 1	Michael Donte Jo	ones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	OF VIRGINIA	
Case number (if known)				☐ Check if this is an
				amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

2/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	7,352.20
	1c. Copy line 63, Total of all property on Schedule A/B	\$	7,352.20
Par	t 2: Summarize Your Liabilities		
		Your lia	abilities i you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	41,970.75
	Your total liabilities	\$	41,970.75
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,486.42
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,466.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

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Debtor 1 Michael Donte Jones

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,304.03

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	600.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	600.00

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			Docum	ent Page 10 of 53			
Fill in	this info	ormation to identify you	r case and this filing:				
Debto	r 1	Michael Donte J	ones				
D OD (O		First Name	Middle Name	Last Name			
Debto							
(Spouse	e, if filing)	First Name	Middle Name	Last Name			
United	States I	Bankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA			
Case r	number						eck if this is an
						ame	ended filing
Offic	cial F	orm 106A/B					
_			ortv			404	_
		ıle A/B: Prop				12/1	
think it i informa Answer	fits best. ation. If m every qu	Be as complete and accur ore space is needed, attacl lestion.	ate as possible. If two marri h a separate sheet to this fo	once. If an asset fits in more than ied people are filing together, both rm. On the top of any additional pa	are equally responsible	for supplying co	orrect
Part 1:	Describ	be Each Residence, Buildin	g, Land, or Other Real Esta	te You Own or Have an Interest In			
1. <b>Do y</b>	ou own o	or have any legal or equitab	le interest in any residence,	, building, land, or similar property	?		
■ N	lo. Go to F	Part 2					
_							
<b>Ц</b> 16	es. when	e is the property?					
Part 2:	Describ	oe Your Vehicles					
3. <b>Car</b> s	lo		ttility vehicles, motorcyc	les	5		
3.1	Make:	Nissan	Who has an inte	erest in the property? Check one	Do not deduct secuthe amount of any		
	Model:	Sentra	Debtor 1 only		Creditors Who Hav	e Claims Secure	d by Property.
	Year:	2004	Debtor 2 only		Current value of the		value of the
		nate mileage: <b>178</b> ormation:	3,420 Debtor 1 and		entire property?	portion	you own?
Г	not run		At least one o	of the debtors and another			
	not run	iiiiig	Check if this (see instruction	is community property	\$600	.00	\$600.00
				onal vehicles, other vehicles, a essels, snowmobiles, motorcycle			
N Y  Add pag	d the doges you	have attached for Part 2 be Your Personal and Hous	2. Write that number here	entries from Part 2, including a		portion ye Do not de	\$600.00  alue of the ou own? duct secured exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

	Case 19-50858-FJS Doc 1 Filed 06/18/19 Entered 06/18/19  Document Page 11 of 53  Case number	11:17:27 Desc Main
Debtor 1		et (ir known)
■ Yes	s. Describe	
	Dishes, Pots, Pans, Silverware, Bookcase, Books, Hand Tools, Pictures	\$200.00
7. Electro Examp	ples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanne	ers; music collections; electronic devices
□ No	including cell phones, cameras, media players, games	
■ Yes	s. Describe	
	TV, Cell Phone	\$200.00
-	tibles of value ples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects;	stamp, coin, or baseball card collections;
_	other collections, memorabilia, collectibles	, ,
■ No □ Yes	s. Describe	
9. <b>Equip</b> r	ment for sports and hobbies	
	ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, sł musical instruments	xis; canoes and kayaks; carpentry tools;
■ No		
☐ Yes	s. Describe	
10. <b>Firea</b> i	rms nples: Pistols, rifles, shotguns, ammunition, and related equipment	
□ No		
Yes	s. Describe	
	Del-ton AR-15 Pistol	\$400.00
11. <b>Cloth</b>		
_Exan	nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
□ No ■ Yes	s. Describe	
	Clothes	\$500.00
12. <b>Jewe</b>	Iry	
<i>Exan</i> □ No	mples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watch	nes, gems, gold, silver
	s. Describe	
	Misc. Jewelry	\$20.00
	MISC. Sewell y	
-	farm animals	
Exan □ No	nples: Dogs, cats, birds, horses	
■ Yes	s. Describe	
	Dog	\$50.00
		<u> </u>
-	other personal and household items you did not already list, including any health aids you did	I not list
■ No	s. Give specific information	

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1 Mic	chael Donte Jones	Case number (if known)	
	ollar value of all of your entries from P Write that number here	art 3, including any entries for pages you have attached	\$1,370.00
Part 4: Describe	e Your Financial Assets		
	have any legal or equitable interest in	any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
□ No	Money you have in your wallet, in your ho	ome, in a safe deposit box, and on hand when you file your petitio	n
		Cash	\$5.00
	Checking, savings, or other financial accoinstitutions. If you have multiple accounts	ounts; certificates of deposit; shares in credit unions, brokerage he with the same institution, list each.  Institution name:	ouses, and other similar
	17.1. Savings	1st Advantage FCU	\$10.00
	17.2. Checking	PNC Bank	\$75.00
	ual funds, or publicly traded stocks Bond funds, investment accounts with bro		
joint ventur		orated and unincorporated businesses, including an interest	in an LLC, partnership, and
■ No □ Yes. Give	specific information about them	 % of ownership:	
Negotiable i	instruments include personal checks, cas	stiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. unsfer to someone by signing or delivering them.	
	specific information about them Issuer name:		
	or pension accounts nterests in IRA, ERISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing p	olans
Yes. List e	each account separately.  Type of account:	Institution name:	
	401(k)	Wells Fargo	\$282.20
Your share	Agreements with landlords, prepaid rent,	that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compani	es, or others

Official Form 106A/B Schedule A/B: Property page 3

Case 19-50858-FJS Doc 1 Filed 06/18/19 Entered 06/18/19 11:17:27 Document Page 13 of 53 Case number (if known) Debtor 1 **Michael Donte Jones** 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ☐ Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 2019 Est. Prorated Tax Refunds not attributed to earned income & \$410.00 State and Federal child tax credits 2019 Est. Prorated Tax Refunds attributed to earned income & child \$2,300.00 State and Federal tax credits 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

Schedule A/B: Property

Beneficiary:

Yes. Name the insurance company of each policy and list its value.

Company name:

No

Official Form 106A/B

page 4

Surrender or refund

value:

Debtor 1	Case 19-50858-FJS  Michael Donte Jones	Doc 1	Filed 06/18/ Document		Entered ge 14 of	53	) 11:17:2 ber <i>(if known)</i>	7 Desc Main
00 4								
If yo	interest in property that is due u are the beneficiary of a living tr eone has died.				nce policy, or	are currently e	entitled to rec	eive property because
⊔ те	s. Give specific information							
Exa ■ No	ns against third parties, wheth mples: Accidents, employment di					and for paymo	ent	
	s. Describe each daim							
34. <b>Othe</b> No	r contingent and unliquidated	claims of ev	ery nature, includir	ng cou	unterclaims o	of the debtor	and rights to	set off claims
☐ Ye	s. Describe each claim							
35. <b>Any</b>	financial assets you did not alr	eady list						
■ Ye	s. Give specific information							
		0	-1 14/					¢2 200 0
		Garnisne	ed Wages					\$2,300.0
	d the dollar value of all of your Part 4. Write that number here						attached	\$5,382.20
Part 5:	Describe Any Business-Related Pro	perty You Ov	vn or Have an Interest	t In. Lis	st any real esta	ate in Part 1.		
37 Do vo	u own or have any legal or equitab	le interest in s	any husiness-related r	nronerf	tv?			
	Go to Part 6.		,	p. 0 p 0	· <b>y</b> ·			
_	Go to line 38.							
<b>—</b> 103	GO to line so.							
	Describe Any Farm- and Commerci f you own or have an interest in farml			wn or H	lave an Interes	st In.		
46. <b>Do v</b>	ou own or have any legal or eg	uitable inter	rest in anv farm- or	comm	nercial fishin	ng-related pro	perty?	
	o. Go to Part 7.	•	•				. ,	
□Y	es. Go to line 47.							
Part 7:	Describe All Property You Own	n or Have an I	nterest in That You Di	id Not I	List Above			
	ou have other property of any mples: Season tickets, country cl							
■ No								

Official Form 106A/B Schedule A/B: Property page 5

54. Add the dollar value of all of your entries from Part 7. Write that number here ......

 $\hfill \square$  Yes. Give specific information.......

\$0.00

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Case number (if known) Document Debtor 1 **Michael Donte Jones** Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$600.00 Part 3: Total personal and household items, line 15 57. \$1,370.00 Part 4: Total financial assets, line 36 58. \$5,382.20 Part 5: Total business-related property, line 45 59. \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$7,352.20

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

Part 7: Total other property not listed, line 54

\$7,352.20

\$7,352.20

Official Form 106A/B Schedule A/B: Property page 6 Case 19-50858-FJS Doc 1 Filed 06/18/19 Entered 06/18/19 11:17:27 Desc Main

Fill in this infor	mation to identify your	case:		
Debtor 1	Michael Donte Jo	nes		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.		Specific laws that allow exemption
2004 Nissan Sentra 178,420 miles not running Line from <i>Schedule A/B</i> : 3.1	\$600.00	100% of fair market va any applicable statutor		Va. Code Ann. § 34-26(8)
Dishes, Pots, Pans, Silverware, Bookcase, Books, Hand Tools, Pictures	\$200.00	■	\$200.00 lue, up to	Va. Code Ann. § 34-26(4a)
TV, Cell Phone Line from Schedule A/B: 7.1	\$200.00	any applicable statutor  100% of fair market va	\$200.00	Va. Code Ann. § 34-26(4a)
Del-ton AR-15 Pistol Line from Schedule A/B: 10.1	\$400.00	any applicable statutor	\$400.00	Va. Code Ann. § 34-26(4b)
Clothes Line from Schedule A/B: 11.1	\$500.00	any applicable statutor	\$500.00	Va. Code Ann. § 34-26(4)
		□ 100% of fair market va any applicable statutor	· ·	

Del	otor 1 Michael Donte Jones	Document		Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Misc. Jewelry Line from Schedule A/B: 12.1	\$20.00		\$20.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Dog Line from Schedule A/B: 13.1	\$50.00		\$50.00	Va. Code Ann. § 34-26(5)
				100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Savings: 1st Advantage FCU Line from Schedule A/B: 17.1	\$10.00		\$10.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Checking: PNC Bank Line from Schedule A/B: 17.2	\$75.00		\$75.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	401(k): Wells Fargo Line from Schedule A/B: 21.1	\$282.20	•	\$282.20	Va. Code Ann. § 34-34
				100% of fair market value, up to any applicable statutory limit	
	State and Federal: 2019 Est. Prorated Tax Refunds	\$410.00		\$410.00	Va. Code Ann. § 34-4
	not attributed to earned income & child tax credits Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	State and Federal: 2019 Est. Prorated Tax Refunds	\$2,300.00		\$2,300.00	Va. Code Ann. § 34-26(9)
	attributed to earned income & child tax credits Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
	Garnished Wages Line from Schedule A/B: 35.1	\$2,300.00		\$2,300.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/22 and every 3  ■ No  □ Yes. Did you acquire the property covere □ No □ Yes	years after that for ca	ses fi		

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Fill in this infor					
Debtor 1	Michael Donte Jo	ones			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number					
(if known)				☐ Check if the amended	

#### Official Form 106D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		Document	Page 1	9 of 53	
Fill in this in	formation to identify your	case:			
Debtor 1	Michael Donte Jo	nes			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	EASTERN DISTRICT OF VII	RGINIA		
Case number (if known)					Check if this is an amended filing
Schedule		ho Have Unsecured			12/15
any executory of Schedule G: Ex Schedule D: Cr eft. Attach the name and case	contracts or unexpired leases secutory Contracts and Unexp editors Who Have Claims Sec Continuation Page to this pag number (if known).	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space i e. If you have no information to r	list executory of Do not include s needed, copy	Part 2 for creditors with NONPRIORITY of contracts on Schedule A/B: Property (Of any creditors with partially secured claithe Part you need, fill it out, number the do not file that Part. On the top of any actions and the control of the top of any actions.	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
	st All of Your PRIORITY Un editors have priority unsecure				
■ No. Go		a olamo agamot you .			
☐ Yes.	to Fait 2.				
	st All of Your NONPRIORIT	V Unsecured Claims			
	editors have nonpriority unsec				
		art. Submit this form to the court wi	th your other sche	edules	
Yes.	a nave nearing to report in and p		,		
unsecured	claim, list the creditor separately	for each claim. For each claim list	ed, identify what t	holds each claim. If a creditor has more ype of claim it is. Do not list claims already three nonpriority unsecured claims fill out	included in Part 1. If more
					Total claim
	eptance Now	Last 4 digits of a	count number	7941	\$2,379.00
5501	iority Creditor's Name  Headquarters Drive  o, TX 75024	When was the de	bt incurred?	2018	
Numb	er Street City State Zip Code ncurred the debt? Check one.	As of the date yo	u file, the claim i	s: Check all that apply	
■ De	ebtor 1 only	☐ Contingent			
□ De	ebtor 2 only	☐ Unliquidated			
□ De	ebtor 1 and Debtor 2 only	☐ Disputed			
☐ At	least one of the debtors and and		ORITY unsecured	d claim:	
	neck if this claim is for a comm				
debt Is the	claim subject to offset?	Obligations aris		ration agreement or divorce that you did no	ot
Is the	-	' '		g plans, and other similar debts	
■ NC		Other. Specify		g present, and care, cultural dobte	
<b>—</b> 16	-	- Other, Specify			<u></u>

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Michael Donte Jones	Case number (if known)	
American Credit Acceptance	Last 4 digits of account number 1700	\$9,481.75
Nonpriority Creditor's Name 961 East Main Street Spartanburg, SC 29302	When was the debt incurred? 2017	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify _ Judgment	
Avant	Last 4 digits of account number 7941	\$3,296.00
Nonpriority Creditor's Name	When we the debt insured 2 2045	
222 N. Lasalle Street Ste 1700	When was the debt incurred? 2015	
Chicago, IL 60611-1010		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Loan	
Bluegreen Corporation	Last 4 digits of account number 66	\$8,108.00
Nonpriority Creditor's Name	Last 4 digits of account number	φο, 100.00
4960 Conference Way North Ste. 100	When was the debt incurred? 2016	
Boca Raton, FL 33431		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims  ☐ Debts to pension or profit-sharing plans, and other similar debts	
■ No		
☐ Yes	■ Other. Specify Loan	

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Debt	or 1 Michael Donte Jones	Case number (if known)	
4.5	BRG Meridian Parkside, LLC	Last 4 digits of account number 7800	\$1,500.00
	Nonpriority Creditor's Name dba Meridian Parkside 1400 Summit Lane Newport News, VA 23601	When was the debt incurred? 2018	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Judgment	_
4.6	Dominion Energy Virginia  Nonpriority Creditor's Name	Last 4 digits of account number 6572	\$444.00
	P.O. Box 26543 Richmond, VA 23290-0001	When was the debt incurred? 2017	_
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility Bill	_
4.7	Enhanced Recovery Nonpriority Creditor's Name	Last 4 digits of account number	\$752.00
	8014 Bayberry Rd. Jacksonville, FL 32256-9412	When was the debt incurred? 2017	_
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection	_

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Michael Donte Jones		Case number (if known)	
Hampton Family Practice	Last 4 digits of account number	8255	\$90.00
9 Manhattan Square	When was the debt incurred?	2017	
Hampton, VA 23666  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Bil	ls	
Labcorp Nonpriority Creditor's Name	Last 4 digits of account number	5635	\$252.00
PO Box 2240 Burlington, NC 27216	When was the debt incurred?	2018	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Medical Bil	ls	
OneMain	Last 4 digits of account number	7941	\$9,780.00
PO Box 1010	When was the debt incurred?	2019	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
	<del>-</del>		
	'		
☐ At least one of the debtors and another		d claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a sens	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	addon agreement of divorce that you did flot	
■ No		ng plans, and other similar debts	
☐ Yes	Other, Specify Loan		
	Nonpriority Creditor's Name 9 Manhattan Square Ste. A Hampton, VA 23666 Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  Labcorp Nonpriority Creditor's Name PO Box 2240 Burlington, NC 27216 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  OneMain Nonpriority Creditor's Name PO Box 1010 Evansville, IN 47706 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset? Another Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Check if this claim is for a community debt Check if this claim is for a community debt Street City State Zip Code Who incurred the debt? Check one. Check if this claim is for a community debt Street City State Zip Code Who incurred the debtors and another Check if this claim is for a community debt Street Caim subject to offset? No	Nampton Family Practice   Nonpriority Creditor's Name   9 Manhattan Square   Ste. A   Hampton, VA 23666   Number Street City State Zip Code   Who incurred the debt? Check one.	Last 4 digits of account number   8255

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Document Page 23 of 53 Debtor 1 Michael Donte Jones ase number (if known) 4.1 **Plaza Services** 7941 \$785.00 Last 4 digits of account number Nonpriority Creditor's Name Bankruptcy Claims Dept. When was the debt incurred? 2017 110 Hammond Drive Ste 110 Atlanta, GA 30328 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Collection 4.1 Riverside Emergency Physician 5253 \$368.00 Last 4 digits of account number 2 Nonpriority Creditor's Name PO Box 1929 2018 When was the debt incurred? Kilmarnock, VA 22482 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Riverside Medical Group Multiple \$411.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Attn: #13076N When was the debt incurred? 2017 PO Box 14000 Belfast, ME 04915 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

debt

■ No

☐ Yes

■ Other. Specify Medical Bills

 $\square$  Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Student loans

report as priority claims

☐ Check if this claim is for a community

Is the claim subject to offset?

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Page 24 of 53 Debtor 1 Michael Donte Jones Case number (if known) 4.1 SME 2337 \$40.00 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 15209 2017 When was the debt incurred? Wilmington, NC 28408 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.1 Sprint 4507 \$1,033.00 Last 4 digits of account number 5 Nonpriority Creditor's Name P.O. Box 4181 When was the debt incurred? 2013 Carol Stream, IL 60197 As of the date you file, the claim is: Check all that apply Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Phone Bill ☐ Yes 4.1 Trail Creek Apts. 7941 \$2,000.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 2 Abbott Dr When was the debt incurred? 2017 Hampton, VA 23666 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Lease

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Name and Address	On which entry in Fart 1 of Fart 2 did you list the original creditor?					
Contract Callers, Inc.	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
501 Greene Street, 3rd Fl Suite 302 Augusta, GA 30901		■ Part 2: Creditors with Nonpriority Unsecured Claims				
7. Laguesta, 67. Cocc.	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Credit Control Corp	Line 4.8 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims				
11821 Rock Landing Dr. Newport News, VA 23606		■ Part 2: Creditors with Nonpriority Unsecured Claims				
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				
Credit Control Corp	Line <b>4.12</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims				
11821 Rock Landing Dr. Newport News, VA 23606		■ Part 2: Creditors with Nonpriority Unsecured Claims				
Tromport from 5, 17, 2000	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part	2 did you list the original creditor?				

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Official Form 106 E/F

**Credit Control Corp** 

11821 Rock Landing Dr.

Line 4.13 of (Check one):

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Michael Donte Jones

Deproi 1	iichael D	onte Jones		Case nu	IIIDEI (II KIIOWI		
Newport N	lews, VA	23606	Last 4 digits of account number				
Name and Address ERC 8014 Bayberry Road Jacksonville, FL 32256			On which entry in Part 1 or Part 2 did y Line 4.15 of ( <i>Check one</i> ):  Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Add Jormandy 400 N. Cer Bldg. 3, St Norfolk, V	LLC nter Dr. te. 124		On which entry in Part 1 or Part 2 did y Line 4.2 of (Check one):  Last 4 digits of account number	☐ Part 1: C	Creditors with	? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Add Kross, Lie P.O. Box 1 Raleigh, N	berman 17449		On which entry in Part 1 or Part 2 did y Line 4.14 of ( <i>Check one</i> ):  Last 4 digits of account number	☐ Part 1: C	Creditors with	? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Ad Midland Fo 2365 North Ste. 300 San Diego	unding L hside Dri	ive	On which entry in Part 1 or Part 2 did y Line 4.3 of (Check one):  Last 4 digits of account number	☐ Part 1: C	Creditors with	? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Ad Phoenix F P.O. Box 3 Indianapol	inancial 861450		On which entry in Part 1 or Part 2 did the Line 4.18 of (Check one):  Last 4 digits of account number	☐ Part 1: C	Creditors with	? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Ad Radius Glo 7831 Glen Minneapol	obal Solı roy Rd.,	Suite 250A	On which entry in Part 1 or Part 2 did y Line 4.9 of (Check one):  Last 4 digits of account number	☐ Part 1: C	Creditors with	? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Ad Security C 2623 W. O Oxford, MS	redit Se xford Lo	rvices, LLC op	On which entry in Part 1 or Part 2 did to Line 4.2 of (Check one):  Last 4 digits of account number	☐ Part 1: C	Creditors with	?? Priority Unsecured Claims Nonpriority Unsecured Claims	
Name and Address Sykes, Bourdon, Ahern, & Levy 281 Independence Blvd. Pembroke 1 Building 5th Floor Virginia Beach, VA 23462			On which entry in Part 1 or Part 2 did the Line 4.5 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims			
	mounts of	im.	claims. This information is for statistic			Total Claim	nounts for each
Total claims from Part 1	6a. 6b. 6c. 6d.	Claims for death or person	ebts you owe the government hal injury while you were intoxicated hunsecured claims. Write that amount here	6a. 6b. 6c. e. 6d.	\$ \$ \$ \$	0.00 0.00 0.00 0.00	

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6e.

6e. Total Priority. Add lines 6a through 6d.

0.00

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Debtor 1 Michael Donte Jones

					Total Claim
	6f.	Student loans	6f.	\$_	600.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$_	41,370.75
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$_	41,970.75

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Fill in this infor	mation to identify your	case:		
Debtor 1	Michael Donte Jo	ones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA	
Case number				
(if known)				☐ Check if this is an amended filing

## Official Form 106G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP (	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del></del>
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
	•				

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		Docume	<u>nt Page 29 c</u>	of 53	
Fill in this info	rmation to identify your	case:			
Debtor 1	Michael Donte Jo	nas			
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Sankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
	, ,				
Case number (if known)					Charle if this is an
(II KIIOWII)					Check if this is an amended filing
					amended ming
Official Fo	orm 106H				
		obtoro			
schedule	H: Your Cod	eptors			12/15
our name and	case number (if known)	. Answer every question you are filing a joint case, or			of any Additional Pages, write
■ No					
☐ Yes					
		I lived in a community pr Nevada, New Mexico, Pu			states and territories include
■ No. Go t	o line 3.				
☐ Yes. Did	your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2 ag	gain as a codebtor only i 0), Schedule E/F (Officia	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and Z	P Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt that apply:
3.1				☐ Schedule D. line	
Name				Schedule E/F, lir	
				☐ Schedule G, line	
				Contoduio C, iirio	
Numb City	er Street	State	ZIP Code		
0,		Cidio	2 0000		
3.2 Name				Schedule D, line	
1421116				☐ Schedule E/F, lin	
				☐ Schedule G, line	·
Numb	er Street			<del>_</del>	

State

City

ZIP Code

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EIII	in this information to identify your c	000:				1					
	otor 1 Michael Dor										
	otor 2				_						
Uni	ted States Bankruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA								
	se number					☐ An					apter
0	fficial Form 106l					$\overline{MM}$	I / DD/ Y	YYY			
S	chedule I: Your Inc	ome									12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	are married and not filing wi	ng jointly, and your spo ith you, do not include i	use i: inforn	s liv natio	ing with yo on about y	ou, inclu our spo	ude inforn ouse. If mo	nation ore spa	about yo	ur eded,
1.	Fill in your employment information.		Debtor 1			С	Debtor 2	or non-fi	ling sp	ouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	oyed			
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not er	mployed			
	employers.	Occupation	Painter								
	Include part-time, seasonal, or self-employed work.	Employer's name	Huntington Ingalls								
	Occupation may include student or homemaker, if it applies.	Employer's address	4101 Washinton Av Newport News, VA		07						
		How long employed t	here? 7.5 yrs				_				
Par	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to repo	rt for a	any I	line, write \$	0 in the	space. Inc	lude yo	our non-fil	ling
	u or your non-filing spouse have mo		ombine the information fo	r all e	mplo	oyers for the	at perso	n on the lii	nes bel	ow. If you	ı need
						For Debto	or 1	For Del			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	4,1	65.60	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

4,165.60

N/A

Deb	tor 1	Michael Donte Jones	_	Case	number ( <i>if known</i> )			
				For	Debtor 1	For Deb	otor 2 or	l
	_						ng spouse	
	Cop	by line 4 here	4.	\$_	4,165.60	\$	N/A	-
5.	List	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	974.28	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	-
	5c.	Voluntary contributions for retirement plans	5c.	\$	373.90	\$	N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	_
	5e.	Insurance	5e.	\$	331.00	\$	N/A	_
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A	_
	5g.	Union dues	5g.	\$_	0.00	\$	N/A	_
_	5h.	Other deductions. Specify:	5h.+			+ \$	N/A	_
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ _	1,679.18	\$	N/A	-
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,486.42	\$	N/A	-
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$_	0.00	\$	N/A	-
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		•		•		
	0.1	settlement, and property settlement.	8c.	\$_	0.00	\$	N/A	_
	8d.	Unemployment compensation Social Security	8d.	\$_ \$	0.00	\$	N/A	_
	8e. 8f.	Other government assistance that you regularly receive	8e.	Φ_	0.00	Φ	N/A	-
	OI.	Include cash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	-
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A	-
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	A
10.		•	10. \$		2,486.42 + \$_	N	<b>/A</b> = \$ _	2,486.42
		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	_					
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depen		•	ed in <i>Sche</i>	<i>dule J.</i> 11. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certailies				. if it	12. \$	2,486.42
							Combin	
13.	Do :	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	?				monthl	y income
		·						

Official Form 106l Schedule I: Your Income page 2

Fill_i	n this informa	tion to identify yo	our case:			1		
Debt		Michael Don				Chec	ck if this is:	
Debt	tor 2							wing postpetition chapter
(Spo	use, if filing)						13 expenses as of	the following date:
Unite	ed States Bankr	uptcy Court for the	EASTE	RN DISTRICT OF VIRGIN	IA	-	MM / DD / YYYY	
1	e number nown)							
Of	ficial Fo	rm 106J						
Sc	chedule	J: Your	Exper	ises				12/1
info	rmation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Part		ibe Your House	hold					
1.	Is this a joir							
	■ No. Go to		in a senar	ate household?				
	□ N		a copa.					
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debi	tor 2.	
2.	Do you have	e dependents?	■ No					
۷.	•	•	_	Fill out this information for	Danandant'a relat	ianahin ta	Denondent's	Deep demandent
	Do not list Do Debtor 2.	eptor i and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ res
								☐ Yes
3.		enses include		No				33
		f people other t d your depende		Yes				
	yoursen and	a your depende	1113:					
		ate Your Ongoi						
exp				uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	icial Form 10		a nave inc	cluded it on Schedule I: \	our income		Your exp	enses
4.		or home owners and any rent for th		ses for your residence. In r lot.	nclude first mortgag	e 4. \$	i	550.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	;	0.00
	•	rty, homeowner's				4b. \$		0.00
				ipkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00 0.00
٥.	aaondi i	gago payiii	, o. y	<del></del>	ino oquity loans	υ. ψ		0.00

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Debtor 1 Michael Donte Jones	Case number (if known)	
6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$ <b>100.</b> 0	0
6b. Water, sewer, garbage collection	6b. \$ 100.0	<u> </u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ 300.0	
6d. Other. Specify:	6d. \$ <b>0.0</b>	
7. Food and housekeeping supplies	7. \$ 400.0	
B. Childcare and children's education costs	8. \$ <b>0.0</b>	
Clothing, laundry, and dry cleaning	9. \$ 75.0	
Personal care products and services	10. \$ 65.0	
Medical and dental expenses	11. \$ <b>0.0</b>	
Transportation. Include gas, maintenance, bus or train fare.	νι. ψ	<u>U</u>
Do not include car payments.	12. \$ <b>150.0</b>	0
3. Entertainment, clubs, recreation, newspapers, magazines, and b	ooks 13. \$ 100.0	0
4. Charitable contributions and religious donations	14. \$ 0.0	
5. Insurance.	- · · · · · · · · · · · · · · · · · · ·	_
Do not include insurance deducted from your pay or included in lines	4 or 20.	
15a. Life insurance	15a. \$ <b>0.0</b>	0
15b. Health insurance	15b. \$ <b>0.0</b>	
15c. Vehicle insurance	15c. \$ 91.0	
15d. Other insurance. Specify:	15d. \$ <b>0.0</b>	
6. Taxes. Do not include taxes deducted from your pay or included in li		_
Specify: Personal Property Taxes	16. \$ <b>10.0</b>	0
7. Installment or lease payments:		_
17a. Car payments for Vehicle 1	17a. \$ <b>0.0</b>	0
17b. Car payments for Vehicle 2	17b. \$	0
17c. Other. Specify:	17c. \$ <b>0.0</b>	0
17d. Other. Specify:	17d. \$ <b>0.0</b>	0
8. Your payments of alimony, maintenance, and support that you of	lid not report as	_
deducted from your pay on line 5, Schedule I, Your Income (Offi		0
<ol><li>Other payments you make to support others who do not live wit</li></ol>	h you. \$ 0.0	0
Specify:	19.	
0. Other real property expenses not included in lines 4 or 5 of this		
20a. Mortgages on other property	20a. \$ <b>0.0</b>	
20b. Real estate taxes	20b. \$ <b>0.0</b>	0
20c. Property, homeowner's, or renter's insurance	20c. \$ <b>0.0</b>	0
20d. Maintenance, repair, and upkeep expenses	20d. \$ <b>0.0</b>	0
20e. Homeowner's association or condominium dues	20e. \$ <b>0.0</b>	0
1. Other: Specify: Contingency	21. +\$ <b>125.0</b>	0
Pet Care	+\$ 50.0	0
O Coloulate very monthly symmetry		
2. Calculate your monthly expenses	¢ 0.400.00	
22a. Add lines 4 through 21.	\$ 2,466.00	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Office		
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ 2,466.00	
3. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule	. 23a. \$ <b>2,486.4</b>	2
23b. Copy your monthly expenses from line 22c above.	23b\$ 2,466.0	_
200. Copy your monthly expenses from line 226 above.	Σου. Ψ Ζ,400.0	<u> </u>
23c. Subtract your monthly expenses from your monthly income.		
The result is your <i>monthly net income</i> .	23c. \$ <b>20.4</b>	2
The result is your mentally not mounted.	<u> </u>	
24. Do you expect an increase or decrease in your expenses within		
For example, do you expect to finish paying for your car loan within the year or	do you expect your mortgage payment to increase or decrease because	of a
modification to the terms of your mortgage?		
■ No.		
☐ Yes. Explain here:		

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Fill in this infor	mation to identify your	case:			
Debtor 1					
Debior 1	Michael Donte Jo First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA		
Casa numbar					
Case number (if known)					☐ Check if this is an amended filing
Official For					
Declarat	tion About a	ın individual	Debtor's So	chedules	12/15
years, or both. 1	ľ8 U.S.C. §§ 152, 1341, 1 n Below			in fines up to \$250,000, or i	
Did you pa	ay or agree to pay some	one who is NOT an attor	rney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				Petition Preparer's Notice, Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	nmary and schedules file	ed with this declaration and	ı
X /s/ Mic	chael Donte Jones		X		
	el Donte Jones		Signature of	Debtor 2	
	re of Debtor 1		Ü		
Date	June 17, 2019		Date		

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	l in this inforn	nation to identify you	ır case:				
De	btor 1	Michael Donte C	Jones Middle Name		Last Name		
De	btor 2						
(Sp	ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Ba	nkruptcy Court for the	EASTERN DISTRICT	OF VIRO	GINIA		
Ca	se number						
(if k	nown)						_
							amended filing
$\sim$	Kiejel Ee	was 107					
	fficial Fo		Affaira far Irali	م د داد ا	de Filipa for D	a.a.l	
			Affairs for Indi				4/1
			ible. If two married peop , attach a separate sheet				
nur	nber (if know	n). Answer every que	estion.				•
Pa	rt 1: Give D	Details About Your M	arital Status and Where	You Live	ed Before		
1.	What is you	r current marital stat	us?				
	☐ Married						
	■ Not mar						
_			. I		live new 2		
2.	During the is	ast 3 years, nave you	lived anywhere other th	an wner	e you live now?		
	□ No						
	Yes. Lis	st all of the places you	lived in the last 3 years. D	o not incl	lude where you live now	<b>'.</b>	
	Debtor 1 Pr	ior Address:	Dates Debto	r 1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1002 Sum	mit Lane, Apt. B	From-To:		☐ Same as Debtor 1		Same as Debtor 1
		News, VA 23601	2/2018-6/20	)18	- Came as Debior		From-To:
	73 Emory		From-To:		☐ Same as Debtor 1		☐ Same as Debtor 1
	Hampton,	VA 23666	11/2017-2/2	<b>2018</b>			From-To:
3.	Within the la	ast 8 years, did you e	ver live with a spouse or	legal ec	quivalent in a commun	ity property state or terri	tory? (Community property
stat	tes and territori	ies include Arizona, Ca	alifornia, Idaho, Louisiana,	Nevada,	, New Mexico, Puerto Ri	co, Texas, Washington an	d Wisconsin.)
	No						
	☐ Yes. Ma	ake sure you fill out Sc	hedule H: Your Codebtors	(Official	Form 106H).		
Pa	rt 2 Explai	in the Sources of You	ır Income				
ıa	Explai	in the cources of Tol	ar income				
4.	Fill in the tota	al amount of income yo	mployment or from opera ou received from all jobs a	nd all bus	sinesses, including part-	time activities.	alendar years?
	If you are filir	ng a joint case and you	I have income that you red	eive toge	ether, list it only once un	der Debtor 1.	
	□ No						
	Yes. Fill	I in the details.					
			Debtor 1			Debtor 2	
			Sources of income	_	ross income	Sources of income	Gross income
			Check all that apply.	•	efore deductions and clusions)	Check all that apply.	(before deductions and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Case number (if known) Debtor 1 Michael Donte Jones

				Debtor 1			Debtor 2		
From January 1 of current year until				Sources of income Check all that apply.	(before			ome pply.	Gross income (before deductions and exclusions)
				■ Wages, commissions, bonuses, tips	\$21,125.18		☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business	
				■ Wages, commissions, bonuses, tips	sions, <b>\$22,660.00</b>		☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business	
				■ Wages, commissions, bonuses, tips		\$34,524.00	☐ Wages, commissions, bonuses, tips		
				☐ Operating a business			☐ Operating a	business	
	Include income regardless of whether that income is taxable. Examples of <i>other income</i> are alimony; child support; Social Security, unemplicant other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.								
				Debtor 1			Debtor 2		
				Sources of income Describe below.	each s	income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pai	rt 3: Lis	st Certain Pa	yments You	Made Before You Filed for I	Bankrupt	су			
6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?  □ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 1 individual primarily for a personal, family, or household purpose."  □ During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?  □ No. Go to line 7.  □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and paid that creditor. Do not include payments for domestic support obligations, such as child support not include payments to an attorney for this bankruptcy case.  * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.								re? ments and thild support an	ne total amount you nd alimony. Also, do
	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?								
■ No. Go to line 7.									
	Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. include payments for domestic support obligations, such as child support and alimony. Also, do not include payment for this bankruptcy case.								
	Credito	r's Name and	d Address	Dates of payme	ent	Total amount	Amount you	Was this p	ayment for

Document Page 37 of 53 ase number (if known) Debtor 1 Michael Donte Jones Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Nο Yes. List all payments to an insider. Insider's Name and Address **Dates of payment** Total amount Amount you Reason for this payment paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Total amount Amount you Reason for this payment Dates of payment Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Jormandy, LLC assignee of Garnishment **Newport News General** Pending American Credit Acceptance, LLC District □ On appeal 2500 Washington Ave. v. Michael Donte Jones □ Concluded GV19005021-01 Newport News, VA 23607 BRG Meridian Parkside, LLC dba **Garnishment Newport News General** Pending Meridian Parkside v. Michael Donte District □ On appeal Jones 2500 Washington Ave. □ Concluded GV18023878-01 Newport News, VA 23607 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

Official Form 107

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Case number (if known) Document Debtor 1 Michael Donte Jones

Pai	t 5: List Certain Gifts and Contributions	3			
13.	Within 2 years before you filed for bankru  ■ No □ Yes. Fill in the details for each gift.	ıptcy, d	did you give any gifts with a total value of more th	nan \$600 per person	?
	Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift and Address:	)	Describe the gifts	Dates you gave the gifts	Value
14.		ıptcy, d	lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or co	ntributi	ion.		
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	or gambling?  ■ No □ Yes. Fill in the details.	otcy or	since you filed for bankruptcy, did you lose anyt	hing because of the	t, fire, other disaster,
	how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending acc claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfers				
16.	consulted about seeking bankruptcy or p	reparin	d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	ou	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	John W. Lee, P.C. 2019 Cunningham Dr. Ste 200 Hampton, VA 23666		\$1,013.00-Attorneys Fee \$335.00-Filing Fee \$22.00-State Court Filing Fee	6-5-19	\$1,370.00
17.	Within 1 year before you filed for bankrup promised to help you deal with your credit Do not include any payment or transfer that you ho	itors o		or transfer any prope	rty to anyone who
	☐ Yes. Fill in the details.				
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment

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Case number (if known) Document

Debtor 1 Michael Donte Jones

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v			any property or s received or debts schange	Date transfer was made
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-protein No Yes. Fill in the details.		y property to a s	elf-settled tr	ust or similar device o	f which you are a
	Name of trust	Description and v	alue of the prop	erty transfer	red	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposi	t Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated to the cooperative of the cooperati	other financial accou	nts; certificates o	of deposit; s		,
	■ No □ Yes. Fill in the details.	,				
		ast 4 digits of account number	Type of accour instrument	cl m	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer
21.	. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?					
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before y	ou filed for bankruptcy	/?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or it to it? Address (Number, State and ZIP Code)		Describe the	contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that some for someone.	eone else owns? Incl	ude any property	you borrow	ed from, are storing fo	or, or hold in trust
	<ul><li>No</li><li>Yes. Fill in the details.</li></ul>					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	property	Value
Par	t 10: Give Details About Environmental Inform	mation				
For	the purpose of Part 10, the following definition	s apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

page 5

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Debtor 1 Michael Donte Jones

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste hazardous substance toxic substance

_	hazardous material, pollutant, contaminant, or similar term.							
Rep	ort all notices, releases, and proceedings t	hat you know about, regardless of wher	n the	y occurred.				
24.	Has any governmental unit notified you the	at you may be liable or potentially liable	und	er or in viol	ation of an environme	ental law?		
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmer know it	ntal law, if you	Date of notice		
25.	Have you notified any governmental unit o	f any release of hazardous material?						
	■ No							
	Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		Environmer know it	ntal law, if you	Date of notice		
26.	Have you been a party in any judicial or ad	Iministrative proceeding under any envi	ironn	nental law?	Include settlements a	and orders.		
	No							
	Yes. Fill in the details.		•••					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ure of the c	ase	Status of the case		
Par	t11: Give Details About Your Business o	r Connections to Any Business						
27.	Within 4 years before you filed for bankrup	otcy, did you own a business or have ar	ny of	the followin	ng connections to any	business?		
	■ A sole proprietor or self-employed	in a trade, profession, or other activity,	, eith	er full-time (	or part-time			
	☐ A member of a limited liability com	pany (LLC) or limited liability partnersh	ip (L	LP)				
	☐ A partner in a partnership							
	lacksquare An officer, director, or managing e	xecutive of a corporation						
	☐ An owner of at least 5% of the voti	ng or equity securities of a corporation						
	lacksquare No. None of the above applies. Go to	Part 12.						
	■ Yes. Check all that apply above and fi	II in the details below for each business	s.					
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business  Name of accountant or bookkeeper			Identification number			
	(	Name of accountant of bookkeeper		Dates bus	iness existed			
	Prime Cuts Barbershop 2116 Roanoke Avenue	Cutting Hair		EIN:	None			
	Newport News, VA 23607			From-To	2017			

Document Page 41 of 53 Case number (if known) Debtor 1 Michael Donte Jones 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes. Fill in the details below. Name **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Michael Donte Jones Signature of Debtor 2 **Michael Donte Jones** Signature of Debtor 1 Date June 17, 2019 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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			•		
Fill in this inform	nation to identify you	ır case:			
Debtor 1	Michael Donte	lones			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the	EASTERN DISTR	ICT OF VIRGINIA		
Case number (if known)				_	Check if this is an amended filing
Official Fo		on for Indiv	iduals Filing Under C	Chapter 7	12/15
<del>- Ctatomor</del>		<u> </u>		inapto: i	.2,.0
	ividual filing under cl e claims secured by	napter 7, you must fill your property, or	out this form if:		
You must file thi	s form with the court ever is earlier, unless		ot expired. you file your bankruptcy petition or by t e time for cause. You must also send co		
	eople are filing togeth nd date the form.	er in a joint case, bot	h are equally responsible for supplying	correct information.	Both debtors must
	and accurate as poss our name and case n		needed, attach a separate sheet to this	form. On the top of a	ny additional pages,
Part 1: List Yo	our Creditors Who H	ave Secured Claims			
For any credite information be		Part 1 of Schedule D:	Creditors Who Have Claims Secured b	y Property (Official Fo	orm 106D), fill in the
	editor and the propert	that is collateral	What do you intend to do with the prosecures a debt?		ou claim the property empt on Schedule C?
Creditor's			☐ Surrender the property.	□No	
name:			Retain the property and redeem it.	□ IVO	,
Description of			☐ Retain the property and enter into a	☐ Ye	s
property			Reaffirmation Agreement.		
securing debt:			☐ Retain the property and [explain]:		

Creditor's ☐ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes ☐ Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's □ No ☐ Surrender the property. name: ☐ Retain the property and redeem it. ☐ Yes  $\square$  Retain the property and enter into a Description of Reaffirmation Agreement. property ☐ Retain the property and [explain]: securing debt: Creditor's ☐ No  $\square$  Surrender the property.

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Michael Donte Jones	Case number (if kr	nown)
nome:			Пу
name:		Retain the property and redeem it.	☐ Yes
Descri	ption of	Retain the property and enter into a Reaffirmation Agreement.	
proper		Retain the property and [explain]:	
	ng debt:	Tretain the property and [explain].	
Part 2:	List Your Unexpired Personal Property	y Leases	
in the info	ormation below. Do not list real estate le	rou listed in Schedule G: Executory Contracts and Unex eases. Unexpired leases are leases that are still in effect y lease if the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe	your unexpired personal property leas	es	Will the lease be assumed?
Lessor's i	name:		□ No
	on of leased		
Property:			☐ Yes
Lessor's			□ No
	on of leased		_
Property:			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
			□ res
Lessor's i			□ No
Description Property:	on of leased		<b></b>
i Toperty.			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
r roporty.			☐ Yes
Lessor's i	name: on of leased		□ No
Property:			☐ Yes
Lessor's i	nama:		□ No
	on of leased		□ NO
Property:			☐ Yes
Part 3:	Sign Below		
l Indox no		licated my intention about any property of my estate tha	t accounts a daht and any narranal
property t	naity of perjury, I declare that I have inc that is subject to an unexpired lease.	incared my intention about any property of my estate tha	it secures a debt and any personal
χ <u>/s/ l</u>	Michael Donte Jones	x	
	hael Donte Jones	Signature of Debtor 2	
Sign	nature of Debtor 1		
Date	June 17, 2019	Date	
		<del></del>	

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# Document Page 44 of 53 United States Bankruptcy Court

		_	•
Eastern	<b>District of</b>	Virg	ginia

In re	re Michael Donte Jones	Case No	0.
	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATION OF A	TTORNEY FOR	DEBTOR
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that compensation paid to me, for services rendered or to be rendered on behalf o bankruptcy case is as follows:		
	For legal services, I have agreed to accept	\$	1,013.00
	Prior to the filing of this statement I have received	\$	1,013.00
	Balance Due	\$	0.00
2.	\$ <b>357.00</b> of the filing fee has been paid.		
3.	The source of the compensation paid to me was:		
	$\blacksquare  \text{Debtor}   \Box  \text{Other } (\textit{specify})$		
4.	The source of compensation to be paid to me is:		
	$\blacksquare$ Debtor $\square$ Other (specify)		
5.	■ I have not agreed to share the above-disclosed compensation with any other p	person unless they are me	embers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or percopy of the agreement, together with a list of the names of the people sharing		
	In return for the above-disclosed fee, I have agreed to render legal service for all a. Analysis of the debtor's financial situation, and rendering advice to the debtor b. Preparation and filing of any petition, schedules, statement of affairs and plan c. Representation of the debtor at the meeting of creditors and confirmation hear d. Other provisions as needed:	in determining whether which may be required;	to file a petition in bankruptcy;

Subject to paragraph six, Counsel agrees to represent the debtor in this case through entry of an order substituting counsel, dismissal, or discharge.

By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtor(s) in any complaint to determine dischargeability, objection to discharge, adversarial proceeding, avoidance of judicial liens, representation in any State court proceeding, actions arising from alleged fraud or criminal conduct of the debtor, adding additional creditor(s) after the bankruptcy has been filed, negotiating reaffirmation agreements, conversion of case to another chapter, or work related to re-opening a closed case.

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I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

June 17, 2019	/s/ Kim A. Lewis
Date	Kim A. Lewis 28045
	Signature of Attorney
	John W. Lee, P.C.
	Name of Law Firm
	2019 Cunningham Drive, Suite 200
	Hampton, VA 23666
	757-896-0868

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,296 (For all Cases Filed on or after 01/01/2019)

#### NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED **STATES TRUSTEE** PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND **CLERK'S CM/ECF POLICY 9**

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE
The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).
Date Signature of Attorney

Fill in this i	nformation to identify your case:						
				ieck one 2A-1Sup		irected in this form and	d in Form
Debtor 1	Michael Donte Jones						
Debtor 2 (Spouse, if filing	ng)			■ 1. Th	ere is no pres	umption of abuse	
United Sta	tes Bankruptcy Court for the: _Eastern District of	Virginia				o determine if a presul nade under <i>Chapter</i> 7	
Case num	ber					cial Form 122A-2).	Wedne Teet
(if known)						does not apply now be service but it could ap	
				☐ Che	ck if this is a	n amended filing	
Officia	l Form 122A - 1						
Chapt	er 7 Statement of Your Cur	rent Moi	nthly Inc	ome	!		12/15
attach a sep case numbe	lete and accurate as possible. If two married people a parate sheet to this form. Include the line number to we or (if known). If you believe that you are exempted from ilitary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the addition n a presumption	nal information a of abuse becau	applies. C ise you d	on the top of ar	ny additional pages, wri narily consumer debts o	te your name and or because of
1. What	is your marital and filing status? Check one on	ly.					
■ No	ot married. Fill out Column A, lines 2-11.						
	arried and your spouse is filing with you. Fill ou	it both Columns	A and B, lines	2-11.			
□ма	arried and your spouse is NOT filing with you.	You and your s	spouse are:				
	Living in the same household and are not lega	lly separated.	Fill out both Co	lumns A	and B, lines 2	2-11.	
	<b>Living separately or are legally separated.</b> Fill of penalty of perjury that you and your spouse are leliving apart for reasons that do not include evadir	egally separated	d under nonbar	nkruptcy	aw that applie	es or that you and you	
101(10A) the 6 mo	e average monthly income that you received from all b. For example, if you are filing on September 15, the 6-m nths, add the income for all 6 months and divide the total own the same rental property, put the income from that p	onth period would by 6. Fill in the re	be March 1 throsult. Do not include	ugh Augu: de any inc	st 31. If the amo	ount of your monthly incor ore than once. For examp	me varied during ole, if both
•				Column Debtor		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, overtime, all deductions).	and commission	ons (before all	\$	4,304.03	\$	
	ony and maintenance payments. Do not include nn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of yo from and re	mounts from any source which are regularly pa u or your dependents, including child support. an unmarried partner, members of your household commates. Include regular contributions from a sp in. Do not include payments you listed on line 3.	Include regular I, your depende	contributions nts, parents,	\$	0.00	\$	
5. Net ii	ncome from operating a business, profession,						
•			otor 1				
	s receipts (before all deductions)	\$ <u>0.00</u> -\$ <u>0.00</u>					
	ary and necessary operating expenses nonthly income from a business, profession, or fari		Copy here ->	\$	0.00	\$	
	ncome from rental and other real property	ПФ	оору у	<b>–</b>			
O. 146111	noome from remarating other real property	Deb	otor 1				
Gross	s receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00					
	nonthly income from rental or other real property	\$ 0.00	Copy here ->	· \$	0.00	\$	
7. Intere	est, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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**Michael Donte Jones** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 \$ 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total current monthly income. Add lines 2 through 10 for 4.304.03 4,304.03 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 4,304.03 Multiply by 12 (the number of months in a year) **x** 12 51,648.36 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. V۸ 1 Fill in the number of people in your household. 61,864.00 Fill in the median family income for your state and size of household. 13. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Michael Donte Jones **Michael Donte Jones** Signature of Debtor 1 Date June 17, 2019

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

MM / DD / YYYY

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapt	er 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	<u>\$15</u>	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

## Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 2116 Roanoke Avenue Newport News, VA 23607

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Bankruptcy Claims Dept. 110 Hammond Drive Ste 110 Atlanta, GA 30328

Michael Donte Jones 2116 Roanoke Avenue Newport News, VA 23607 Enhanced Recovery 8014 Bayberry Rd. Jacksonville, FL 32256-9412 Radius Global Solution, LLC 7831 Glenroy Rd., Suite 250A Minneapolis, MN 55439

Office of the U.S. Trustee Federal Building, Room 625 200 Granby Street Norfolk, VA 23510

ERC 8014 Bayberry Road Jacksonville, FL 32256 Riverside Emergency Physician PO Box 1929 Kilmarnock, VA 22482

Acceptance Now 5501 Headquarters Drive Plano, TX 75024

Hampton Family Practice 9 Manhattan Square Ste. A Hampton, VA 23666

Riverside Medical Group Attn: #13076N PO Box 14000 Belfast, ME 04915

American Credit Acceptance 961 East Main Street Spartanburg, SC 29302

Jormandy LLC 400 N. Center Dr. Bldg. 3, Ste. 124 Norfolk, VA 23502

Security Credit Services, LLC 2623 W. Oxford Loop Oxford, MS 38655

Avant 222 N. Lasalle Street Ste 1700 Chicago, IL 60611-1010

Kross, Lieberman & Stone P.O. Box 17449 Raleigh, NC 27619-7449

SME P.O. Box 15209 Wilmington, NC 28408

Bluegreen Corporation 4960 Conference Way North Ste. 100 Boca Raton, FL 33431

Labcorp PO Box 2240 Burlington, NC 27216

Sprint P.O. Box 4181 Carol Stream, IL 60197

BRG Meridian Parkside, LLC dba Meridian Parkside 1400 Summit Lane Newport News, VA 23601

Midland Funding LLC 2365 Northside Drive Ste. 300 San Diego, CA 92108

Sykes, Bourdon, Ahern, & Levy 281 Independence Blvd. Pembroke 1 Building 5th Floor Virginia Beach, VA 23462

Contract Callers, Inc. 501 Greene Street, 3rd Fl Suite 302 Augusta, GA 30901

OneMain PO Box 1010 Evansville, IN 47706 Trail Creek Apts. 2 Abbott Dr Hampton, VA 23666

Credit Control Corp 11821 Rock Landing Dr. Newport News, VA 23606 Phoenix Financial Services P.O. Box 361450 Indianapolis, IN 46236

US Department of Education PO Box 5609 Greenville, TX 75403-5609

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